

PTO/SB/26 (06-04)

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TERMINAL DISCLAIMER TO OBEY A DOUBLE PATENTING  
REJECTION OVER A "PRIOR" PATENTDocket Number (Optional)  
021123-0238397

In re Application of: Esh et al.

Application No.: 08/870,591

Filed: June 6, 1997

For: Precipitated Silica

The owner", Jeffrey N. Townes, of 100 percent interest in the instant application hereby disclaims, except as provided below, the terminal part of the statutory term of any patent granted on the instant application which would extend beyond the expiration date of the full statutory term prior patent No. 6,180,076 as the term of said prior patent is defined in 35 U.S.C. 154 and 173, and as the term of said prior patent is presently shortened by any terminal disclaimer. The owner hereby agrees that any patent so granted on the instant application shall be enforceable only for and during such period that it and the prior patent are commonly owned. This agreement runs with any patent granted on the instant application and is binding upon the grantee, its successors or assigns.

In making the above disclaimer, the owner does not disclaim the terminal part of the term of any patent granted on the instant application that would extend to the expiration date of the full statutory term as defined in 35 U.S.C. 154 and 173 of the prior patent, "as the term of said prior patent is presently shortened by any terminal disclaimer." In the event that said prior patent later:

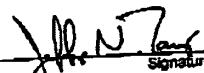
expires for failure to pay a maintenance fee;  
is held unenforceable;  
is found invalid by a court of competent jurisdiction;  
is statutorily disclaimed in whole or terminally disclaimed under 37 CFR 1.321;  
has all claims canceled by a reexamination certificate;  
is reissued; or  
is in any manner terminated prior to the expiration of its full statutory term as presently shortened by any terminal disclaimer.

Check either box 1 or 2 below, if appropriate.

1.  For submissions on behalf of a business/organization (e.g., corporation, partnership, university, government agency, etc.), the undersigned is empowered to act on behalf of the business/organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

2.  The undersigned is an attorney or agent of record. Reg. No. 47,142

  
Signature \_\_\_\_\_ Date January 13, 2005

Jeffrey N. Townes  
Typed or printed name \_\_\_\_\_

703-805-2000  
Telephone Number \_\_\_\_\_

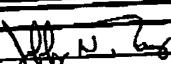
Terminal disclaimer fee under 37 CFR 1.20(d) included.

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Form PTO/SB/96 may be used for making this certification. See MPEP § 324.

This collection of information is required by 37 CFR 1.321. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL For FY 2005																																																																																													
<p>Under the Paperwork Reduction Act of 1995, no patents are required to respond to a collection of information unless it is known a valid such (OMB) number</p> <p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (PL. 108-487).</p> <table border="1"> <thead> <tr> <th colspan="2"></th> <th colspan="4">Complete If Known</th> </tr> <tr> <th colspan="2"></th> <th>Application Number</th> <td colspan="3">08/870,691</td> </tr> <tr> <th colspan="2"></th> <th>Filing Date</th> <td colspan="3">June 6, 1997</td> </tr> <tr> <th colspan="2"></th> <th>First Named Inventor</th> <td colspan="3">Esch</td> </tr> <tr> <th colspan="2"></th> <th>Examiner Name</th> <td colspan="3">S. Hendrickson</td> </tr> <tr> <th colspan="2"></th> <th>Art Unit</th> <td colspan="3">1754</td> </tr> <tr> <th colspan="2">TOTAL AMOUNT OF PAYMENT</th> <td>(\$)</td> <td colspan="3">130</td> </tr> <tr> <th colspan="2"></th> <th colspan="4">Attorney Docket No. 021123-0238397</th> </tr> </thead> </table> <p><b>METHOD OF PAYMENT</b> (check all that apply)</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____</p> <p><input checked="" type="checkbox"/> Deposit Account Deposit Account Number 033976 Deposit Account Name: _____</p> <p>For the above-identified deposit account, the Director is hereby authorized to (check all that apply)</p> <p><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</p> <p><input checked="" type="checkbox"/> Change any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments</p> <p>under 37 CFR 1.16 and 1.17</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>								Complete If Known						Application Number	08/870,691					Filing Date	June 6, 1997					First Named Inventor	Esch					Examiner Name	S. Hendrickson					Art Unit	1754			TOTAL AMOUNT OF PAYMENT		(\$)	130					Attorney Docket No. 021123-0238397																																											
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<p><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b></p> <table border="1"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> </tr> <tr> <th>Small Entity</th> <th>Fee (\$)</th> <th>Small Entity</th> <th>Fee (\$)</th> <th>Small Entity</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table> <p><b>2. EXCESS CLAIM FEES</b></p> <p>Fee Description</p> <p>Each claim over 20 (including Reissues)</p> <p>Each independent claim over 3 (including Reissues)</p> <p>Multiple dependent claims</p> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>20 or HP =</td> <td></td> <td></td> <td></td> <td>Fee (\$)</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>50 25</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>200 100</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>360 180</td> </tr> </tbody> </table> <p>Multiple Dependent Claims</p> <p>Total Claims <input type="checkbox"/> Extra Claims <input type="checkbox"/> Fee (\$)</p> <p>Indep. Claims <input type="checkbox"/> Extra Claims <input type="checkbox"/> Fee (\$)</p> <p>3 or HP = <input type="checkbox"/> Extra Claims <input type="checkbox"/> Fee (\$)</p> <p>HP = highest number of total claims paid for, if greater than 20.</p> <p>HP = highest number of independent claims paid for, if greater than 3.</p> <p><b>3. APPLICATION SIZE FEE</b></p> <p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</p> <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>100 =</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>100 = <input type="checkbox"/> 50 = <input type="checkbox"/> (round up to a whole number) <input type="checkbox"/> Fee (\$)</p> <p><b>4. OTHER FEE(S)</b></p> <p>Non-English Specification, \$130 fee (no small entity discount) <input type="checkbox"/> 130</p> <p>Other (e.g., late filing surcharge): Terminal disclaimer fee</p>						Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Utility	300	150	500	250	200	100	Design	200	100	100	50	130	65	Plant	200	100	300	150	160	80	Reissue	300	150	500	250	600	300	Provisional	200	100	0	0	0	0	Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	20 or HP =				Fee (\$)					50 25					200 100					360 180	Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	100 =									
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<p>SUBMITTED BY </p> <table border="1"> <tr> <td>Signature</td> <td>Jeffrey N. Townes</td> <td>Registration No. 47,142 (Attorney/Agent)</td> <td>Telephone 703-905-2000</td> </tr> <tr> <td colspan="2">Name (Print/Type)</td> <td colspan="2">Date January 13, 2005</td> </tr> </table> <p>This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, preparing, and submitting the completed application form to the USPTO, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p>If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.</p>						Signature	Jeffrey N. Townes	Registration No. 47,142 (Attorney/Agent)	Telephone 703-905-2000	Name (Print/Type)		Date January 13, 2005																																																																																	
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